



DEPARTMENT OF THE NAVY

DIRECTOR NAVAL RESERVE INFORMATION SYSTEMS OFFICE
4400 DAUPHINE STREET
NEW ORLEANS, LOUISIANA 70146-5401

NAVRESINFOSYSOFFINST 4061.1
N254

3 FEB 1998

NAVRESINFOSYSOFF INSTRUCTION 4061.1

Subj: REGULATIONS GOVERNING PAYMENT FOR MISSED MEALS

Ref: (a) MILPERSMAN 2640100
(b) PSDNSANOLAINST 7220.2F
(c) NAVSUPPACTNRLNSINST 7220.26

Encl: (1) Basic Allowance for Subsistence Worksheet

1. Purpose. To provide revised guidance for submission of missed meal requests.
2. Information. References (a) and (b) state that enlisted members who receive basic pay are entitled to Basic Allowance for Subsistence (BAS) when specific meals are missed from a Government mess. The Basic Allowance for Subsistence Worksheet, enclosure (1), is provided to allow members assigned on the East Bank to supplement their COMRATS, and members who use a meal pass to recoup a determined amount of money on a monthly basis for meals missed due to working hours and impracticability of crossing the river during meal hours. Rates are based on the current pay raise and may be claimed only by completing and submitting the Basic Allowance for Subsistence Worksheet each month per reference (c).
3. Action. Director, Administrative Services Office will complete enclosure (1) daily from the information provided on the department's daily muster reports. For individuals who qualify under this program, missed meals other than "lunch" must be justified. Per reference (c), members will forward the Basic Allowance for Subsistence Worksheet to Personnel Support Detachment by the fifth day of each month.


D. A. WIKENHEISER

Distribution: (NAVRESINFOSYSOFFINST 5216.1)
List A
List B

BASIC ALLOWANCE FOR SUBSISTENCE WORKSHEET

1. YRMON		2. PRORATED BAS <input type="checkbox"/>		3. SUPPLEMENTAL BAS <input type="checkbox"/>		4. FRACTIONAL COLA <input type="checkbox"/>		5. COLA RATE \$		6. UNITLD. CODE	
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B																																
D																																
S																																

7. SSN				8. NAME (LAST, FIRST, MIDDLE INITIAL)		9. B		10. D		11. S		1
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12. SSN				13. NAME (LAST, FIRST, MIDDLE INITIAL)		14. B		15. D		16. S		2
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17. SSN				18. NAME (LAST, FIRST, MIDDLE INITIAL)		19. B		20. D		21. S		3
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22. SSN				23. NAME (LAST, FIRST, MIDDLE INITIAL)		24. B		25. D		26. S		4
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27. SSN				28. NAME (LAST, FIRST, MIDDLE INITIAL)		29. B		30. D		31. S		5
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32. SSN				33. NAME (LAST, FIRST, MIDDLE INITIAL)		34. B		35. D		36. S		6
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37. SSN				38. NAME (LAST, FIRST, MIDDLE INITIAL)		39. B		40. D		41. S		7
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42. MEMBERS LISTED (THIS PAGE)		SIGNATURE OF CERTIFYING OFFICER:		RANK:		TITLE:	
		COMMAND:		DATE SUBMITTED:			